

AO 240 (Rev. 07/10) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

UNITED STATES DISTRICT COURT

for the
Eastern District of Arkansas

FILED
U.S. DISTRICT COURT
EASTERN DISTRICT OF ARKANSAS

JUN 16 2014

JAMES W. McCORMACK, CLERK
By: J. Brown DEP. CLERK

Devenish Scott #131042

Plaintiff/Petitioner

v.

Civil Action No. 5:14-CV-237 SWW/BD

Defendant/Respondent

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

I support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: Varner Super max

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

My gross pay or wages are: \$ none, and my take-home pay or wages are: _____ per

(specify pay period) _____

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

(a) Business, profession, or other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(b) Rent payments, interest, or dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(c) Pension, annuity, or life insurance payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(d) Disability, or worker's compensation payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(e) Gifts, or inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(f) Any other sources	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

my self

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4. Amount of money that I have in cash or in a checking or savings account: \$ 0

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing value that I own, including any item of value held in someone else's name (describe the property and its approximate value):

1979 buick regal \$179,00

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide the amount of the monthly expenses):

Legal material, legal copies, legal postage, pens, paper
nothing paid. \$40

7. Names (or, if under 18, initial only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

none

8. Any debts or financial obligations (describe the amounts owed and to whom they are payable):

none

Declaration: I declare under penalty or perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date:

4/28/14

Derech Scott

Applicant's signature

Derech Scott

Printed name

CERTIFICATE

(Prisoner Accounts Only)

(To be Completed by the Institution of Incarceration)

Deverick Scott, ADC#131042

I certify that the applicant named herein has the sum of \$ \$49.18 on account to

his/her credit at the Varner Unit institution where he is confined.

I further certify that the applicant likewise has the following securities to his/her credit according

to the records of said institution: none to my knowledge

I further certify that during the past six months the applicant's average balance was

\$ 32.09.

5/2/14
Date

Rich Calloway
Signature of Authorized Officer of Institution

CALCULATION OF INITIAL PAYMENT OF FILING FEE

(To be Completed by the Institution of Incarceration)

PLAINTIFF: Devenik Scott

ADC NUMBER: 131642

FEDERAL COURT CASE NUMBER (IF KNOWN): _____

Total deposits for las six (6) months: \$ 884.15

Average monthly deposit (total deposits divided by 6) \$ 147.36

Total balances for last six (6) months: \$ 192.51

Average monthly balance: \$ 32.09
(Total balances divided by 6)

Current account balance \$ 49.18

Initial payment of filing fee as of 5/2/14: \$ 29.47

(The greater of the average monthly deposit
Or the average monthly balance x .20)

DATE: 5/2/14

AUTHORIZED OFFICIAL Keith Calloway

(NO FILING FEE SHALL BE IN EXCESS OF
\$350.00 FOR A CIVIL LAWSUIT
OR
\$455 FOR AN APPEAL)

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REPORT NO. IBSR146 - 35

**CALCULATION OF INITIAL PAYMENT OF
FILING FEE**

FROM: 11/3/2013 TO: 05/02/2014

PAGE: 1 of 1
PROCESSED: 05/02/2014 01:04 PM
REQUESTOR: Ruth A Calloway

(To be Completed by the Institution of Incarceration)

PLAINTIFF: Deverick Deshonee Scott

ADC NUMBER: 131042

FEDERAL COURT CASE NUMBER (IF KNOWN): _____

TOTAL DEPOSITS FOR LAST (6) MONTHS: \$884.15

AVERAGE MONTHLY DEPOSIT: (TOTAL DEPOSITS DIVIDED BY 6) \$147.36

TOTAL BALANCES FOR LAST SIX (6) MONTHS: \$192.51

AVERAGE MONTHLY BALANCE (TOTAL BALANCES DIVIDED BY 6): \$32.09

CURRENT ACCOUNT BALANCE: \$49.18

INITIAL PAYMENT OF FILING FEE AS OF: 05/02/2014 \$29.47

(THE GREATER OF THE AVERAGE MONTHLY DEPOSIT OR THE AVERAGE
MONTHLY BALANCE x .20)

DATE:

5/2/14

AUTHORIZED OFFICIAL:

Ruth Calloway

(NO FILING FEE SHALL BE IN EXCESS OF \$350
FOR A CIVIL LAWSUIT OR \$455 FOR AN APPEAL)